City of Lyons

161 NE Broad St Lyons, GA 30436 Office (912) 526-3626 Fax (912) 526-0607



Commercial and Industrial Building Permit Application

Date: Curren	t Zone:	Permit #			
Property Owner Name:					
Site Address:	te Address: Tax Map Parcel:				
Phone Number:					
Mailing Address (if different from a	bove):				
City:	State:	Zip:			
Party Responsible for Payment:					
Billing Address:					
City:	State:	Zip:			
□New Construction (provide with	application the following):	Renovation			
Site Plan (must show set)Construction Plans	backs and property lines)	 Renovation Addition to existing structure ****Stake corners of addition 			
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 Site Plan (must show set) Construction Plans ****Stake corners of con 	backs and property lines)	□Addition to existing structure ****Stake corners of addition			
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Site Plan (must show set) Construction Plans ****Stake corners of con Total Sq. Ft. of any constru Describe Work: Who is responsible for this work ()	backs and property lines) nstruction uction or addition \$ Owner() Tenant() Contrac	☐Addition to existing structure ****Stake corners of addition 5Cost of Improvement			

City: ______ State: _____ Zip: _____

UPDATED: 10/15/2020

General Cont	actor
	tractor
HVAC Contra	ctor
License #	
	itractor
License #	
Fee Schedule	

Administration Fee

CO Fee

\$75.00 (this fee is to be paid prior to building permit issuance).

This fee is based on the number of inspections needed for the project. Most project require a rough and final inspection per trade. Final payment will be required before a certificate of occupancy will be issued. Each inspection is \$225.00.

Term – Building permit is active for 365 days from date of issuance: Provided that the work is not completed within the initial permit term.

A copy of the Recorded Deed and/or Recorded plat must be attached to this application

State licensing required. Persons engaging in construction, electrical, plumbing, gas, mechanical, low-voltage or utility contracting on any work within the city are

required to possess a license issued by the state construction licensing industry board as a condition for performing the work; provided, however, the owner of a single-family dwelling performing work (other than utility contracting) within a dwelling occupied by him as his personal residence, shall be exempt from state licensing. Where a state license is required, every applicant for a permit shall furnish proof, at time of application, that he or the person contracted to do the work holds a valid state license in good standing. Failure to meet this requirement may be grounds for revocation of the permit.

Whenever necessary to make an inspection to enforce any of the provisions of the state minimum standard codes, or whenever the city manager or his designated representative has probable cause to believe that there exists in any building or structure or upon any premises within the city any condition or code violation which makes such building, structure, or premises, unsafe, dangerous or hazardous, the city manager or his designated representative, may enter such building, structure, or premises, at all reasonable times to inspect the same or to perform any duty imposed by this article; provided, if such building, structure, or premises is occupied, he shall first present proper credentials and request entry from the building's owner or occupant. If such building, structure or premises and request entry. If entry is refused, the city manager or his designated representative may apply to the judge of the municipal court of the city for an administrative search warrant.

Signature of applicant verifies the above information is true and correct. I understand the conditions under which my Certificate of Use is being approved and accepted that no changes or refunds can be made once issued. I am authorized to sign for the property owner and understand that any misrepresentation of information on this application may result in the revocation of the zoning permit and/or possible enforce action being initiated against the property owner or his/her representative.

Applicant Name

Signature

For Official Use Only

Check List – Please Initial

_____Recorded Deed and/or Recorded Plat

_____Zoning – Certificate of use application approved

_____Permit Fees Paid

_____Taxes must be current

Approved by ______

Date _____

Inspection	Inspected By	Initial inspection Date	Final (approved) inspection
Building			
Electrical			
Plumbing / Gas			
HVAC			
Grading			
Certificate of Oc	cupancy Signature	:	